

City of Willoughby Hills

Phone: (440) 975-3550

Building Department

Facsimile: (440) 918-8749

35405 Chardon Road

Willoughby Hills, OH 44094

November 28, 2017

RE: 2018 Contractor Registration – PLEASE SEE CHANGES TO OUR REGISTRATION PROCESS

Dear Contractor,

Enclosed you will find your Contractor Registration Packet. All contractors doing business in the City of Willoughby Hills will need to register with the City. Due our relationship with the Lake County Building Department effective October 10, 2017, not all contractors will need to pay for their registration. Please see the attached instructions to determine if you will be required to pay for your registration.

Please remember to send the following items so your registration can be processed:

- ☐ Completed **notarized** application.
- ☐ **Signed and notarized** \$20,000.00 bond on the City bond form with expiration date of December 31, 2018.
- ☐ Certificate of liability insurance with the City as the additional insured.
- ☐ Copy of current state license, if required.
- ☐ **Check or money order for \$100.00 or**
Proof of Registration with Lake County Building Department.
- ☐ Self-addressed, stamped envelope.

Please contact me if you have any questions regarding your registration renewal.

Thank You,


Denise R. Edwards

Building and Service Department Clerk

City of Willoughby Hills Building Department

Changes Effective October 10, 2017

Contractors performing the following work in Willoughby Hills will be required to **Register in the Willoughby Hills Building Department and pay the \$100.00 registration fee:**

- Re-roof and shingles as long as no structural and or major wood replacement "typically more than 3-4 sheets of plywood"
- Concrete flat work that is not under the roof (driveways, sidewalks, patios, aprons)
- Window/door replacement (If the size is not changing more than an inch or two)
- Siding
- Sheds under 200 square feet
- Waterproofing
- Fences
- Above ground swimming pools (electric permit through Lake County Building Department)
- Sewer or Culvert Pipe replacement
- Waterproofing
- Gas tie ins
- Road Opening
- Tree Harvesting
- Changing existing grade of land
- Other work requiring permit, not covered by Lake County

*Contractors performing the following work in Willoughby Hills will be required to **Register in the Willoughby Hills Building Department and will have the \$100.00 registration fee waived with proof of registration with the Lake County Building Department:**

- Electrical
- Plumbing
- HVAC
- In-ground pools
- Concrete stairs
- Construction
- Sheds over 200 square feet
- Roofing with structural changes
- window or doors with size changes of 2" or more
- Decks

*Effective October 10, 2017, permits for work on this list are now obtained through the Lake County Building Department.

Any type of work not mentioned or questions, please contact us.
(440) 975-3550

The Lake County Building Department
(440) 350-2636

IN ACCORDANCE WITH THE PROVISIONS OF SECTION 1373 OF THE CITY OF WILLOUGHBY HILLS CODIFIED ORDINANCE 2006

REGISTRATION REQUIRED. No person, firm or corporation (including but not limited to, general contractors, subcontractors, and mechanical trades) shall engage in the business or act in the capacity of a contractor except pursuant to a certificate of registration. All persons, prior to engaging in or being employed as responsible for the installation, replacement, and/or construction (such as construct, alter, repair, add to, subtract from, demolish, reconstruct or remodel any building, structure or appurtenance thereto) within the City shall obtain the required certificate of registration. At least one responsible member, officer or employee must be registered by the City to make such installations. All work performed by such shall be under direct supervision of the registered person.

"IMPORTANT"

READ THESE INSTRUCTIONS THOROUGHLY TO ASSURE INFORMATION REQUIRED IS CORRECT AND COMPLETE (see *)

Application must be complete and the applicant's signature must be notarized. Applicant must be the registering contractor. Notary Public Service is available at City Hall. Please Print Legibly.

PERMITS ISSUED ONLY TO REGISTERED CONTRACTORS. When permits are required for work to be performed by Contractors, they will only be issued to those that are properly registered with the Building Department.

- The registering contractor may list persons authorized to pull permits under this registration request. If the list exceeds the application space given, please provide a separate sheet on company letterhead, stating authority. It must also be signed by the registering contractor and must be notarized.

BOND AND INSURANCE

- Copy of Current Certificate of Liability in the amount of \$100,000/\$300,000 for bodily injury and \$50,000 for property damage (Willoughby Hills named as additionally insured).
** The contractor is responsible for having copies of updated certificates and licenses forwarded to the Building Department in order to keep our records current. If a certificate of insurance or license expires within the year of registration, it can prevent issuance of a permit and/or the issuance of a stop work order.
- Willoughby Hills Bond form completed by bond issuer with the bonding obligation in the amount of \$20,000 – expiration date of December 31 of year of issuance. Continuation Certificates are not accepted. Bond to be signed and sealed.

ELIGIBILITY FOR CERTIFICATES OF LICENSES AND REGISTRATION No applicant shall be registered as a contractor unless the applicant is the holder and submits proof of a current certificate, license, and/or registration, as required.

- Electrical, HVAC and Plumbing: State Certification/Professional License from a testing Municipality or County. See ** above.
- **FIRST TIME REGISTRATION:** Current copy of State Certification/Professional License OR copies of three (3) current municipality registrations with other communities for review by the Building Commissioner.

EXPIRATION AND RENEWALS: All registration certificates expire on December 31st in the year of issuance.

- A Check payable to: The City of Willoughby Hills/Registration Fee: \$100.00
- See the list of Contractors that have the Registration Fee waived.
- If application is mailed, send a regular #10 - self addressed, stamped envelope for a return certificate.

REVOCATION AND SUSPENSION OF REGISTRATION A certificate of registration may be suspended or revoked by the Building & Zoning Inspector, as per Section 1373.08. Violations and penalties can apply, per Section 1373.99.

— PERMITS —

Permits are subject to charges PLUS 1% OBBS fee

Forms are available in the building department or at www.willoughbyhills-oh.gov

Permit Hours: Monday through Friday, 8:00 a.m. to 4:00 p.m.

- ❖ ANY CONTRACTOR REGISTRATION PACKAGES THAT ARE INCOMPLETE OR INCORRECT MAY BE REJECTED AND RETURNED WITH AN INVOICE FROM THE CITY OF WILLOUGHBY HILLS FOR AN ADMINISTRATION FEE IN THE AMOUNT OF \$30.00. SAID FEE MUST BE PAID SEPARATELY AND ENCLOSED WITH THE REVISED AND CORRECTED REGISTRATION PACKAGE.

APPLICATION FOR CERTIFICATE OF CONTRACTOR REGISTRATION

Registration Type : ☐ Electrical ☐ HVAC ☐ Plumbing ☐ Sewer ☐ General (specify) _____

List all State Licenses Held: _____

FED.ID # _____ OR SOC SEC # _____

PRINT CLEARLY

APPLICANT NAME CONTRACTOR NAME	_____	COMPANY NAME	_____
ADDRESS	_____	ADDRESS	_____
CITY/STATE/ZIP	_____	CITY/STATE/ZIP	_____
MOBILE	_____	OFFICE PHONE	_____
	_____	OFFICE FAX	_____
E-MAIL ADDRESS	_____	WEB ADDRESS	_____

The following person(s) can pull permits under the contractor that holds registration:

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

--- If more space is required, please attach a list on company letterhead (note this list must be signed and notarized by contractor, as well).

I, _____, do hereby swear/affirm that all the above facts are true to the best of my knowledge and belief.

(Print)

Sworn to and before me this _____ day of _____, 20 _____

SIGNATURE OF APPLICANT

In the City of _____

State of _____, County _____

Signature of NOTARY PUBLIC, Commission Expiration Date

PLEASE RETURN THIS COMPLETED FORM, REQUIRED DOCUMENTS AND PAYMENTS TO
Willoughby Hills Building & Zoning Department - 35405 Chardon Road -- Willoughby Hills OH 44094

\$100.00 Registration Fee -

FEE \$ _____

FIRST TIME REGISTRATION: ☐ APPROVED ☐ DENIED _____
Building Commissioner Date

OFFICE USE: Amount Recv'd \$ _____ Recpt # _____ Cash/Check # _____ Reg # _____ Date _____

City of Willoughby Hills

Building Department

35405 Chardon Road, Willoughby Hills, OH 44094
440-975-3550 Office; 440-918-8749 Fax

PERFORMANCE BOND AND LICENSE AND PERMIT BOND BOND NO. _____

KNOW ALL MEN BY THESE PRESENTS:

That we, _____ of _____,
State of _____, as Principal, and _____, a
corporation duly licensed to do surety business in the State of _____, as Surety, are
held and firmly bound unto the City of Willoughby Hills, Ohio, and/or any resident, and/or any property owner,
as Obligee, in the penal sum of not to exceed TWENTY THOUSAND DOLLARS (\$20,000.00) lawful money of
the United States, for which payment well and truly to be made, we bind ourselves and our legal representative
firmly by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH, that whereas the Principal has been
licensed as _____ by the City of Willoughby Hills.

NOW, THEREFORE, if the Principal shall faithfully perform all the contractual obligations on and for the
real estate in question in a workmanlike manner and shall further perform all the other duties and
responsibilities and also comply with the Building and Zoning Codes and Ordinances of the City of Willoughby
Hills, Ohio, including all amendments thereto, pertaining to the license or permit applied for, then this obligation
to be void; otherwise to remain in full force and effect until cancelled by the Surety as provided below or
released by the Obligee.

This bond may be terminated at any time by the Surety upon sending written notice by First Class U.S.
Mail to the Obligee and to the Principal at the addresses last known to the Surety, and at the expiration of thirty
(30) days from the mailing of said notice, this bond shall terminate and the Surety shall be relieved from any
liability for any acts or omissions of the Principal subsequent to that date. The Surety shall not be liable for
more than the amount of this bond, regardless of the number of claims made against this bond or the number
of years this bond remains in force. Any revision of the amount of this bond shall not be cumulative.

Dated this _____ day of _____, 20____.

Principal

Expires on December 31st of the year 20____

By _____
Name and Title

_____, SURETY

By _____
Name and Title

Insurance Agency/Agent:
Name _____

Address _____

Phone No. _____ FAX No. _____

FEDERAL IDENTIFICATION NUMBER _____

SOCIAL SECURITY NUMBER (COMPLETE ONLY IF A SOLE PROPRIETOR) _____

FILING STATUS: ☐ CORPORATION ☐ ESTATE/TRUST ☐ LLC ☐ NON-PROFIT ☐ PARTNERSHIP ☐ S-CORP. ☐ SOLE PROPRIETOR

RITA LOCATION NAME AND ADDRESS AS USED FOR BUSINESS PURPOSES

BUSINESS NAME: _____ PHONE: (_____) _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

IF CORPORATE SUBSIDIARY, GIVE NAME AND ADDRESS OF PARENT COMPANY MAIN OFFICE

BUSINESS NAME: _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

IF SOLE PROPRIETORSHIP, GIVE OWNER'S NAME AND HOME ADDRESS

NAME: _____ PHONE: (_____) _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

WHAT DATE DID YOU BEGIN OPERATIONS IN A RITA MUNICIPALITY? _____

PLEASE LIST THE COMPANY NAICS CODE OR CHECK THE BOX THAT BEST DESCRIBES THE COMPANY BUSINESS TYPE.

NAICS _____ ☐ TRANSPORTATION ☐ NON MANUFACTURING ☐ MANUFACTURING ☐ WHOLESALE
☐ RETAIL ☐ FINANCE ☐ SERVICES ☐ PUBLIC ADMINISTRATION ☐ NON CLASSIFICATION

EMPLOYEE INFORMATION

DO YOU HAVE ANY EMPLOYEES? (CHECK ONLY ONE) ☐ YES ☐ NO ARE CONTRACTORS UTILIZED? (CHECK ONLY ONE) ☐ YES ☐ NO
*IF YES COMPLETE REVERSE SIDE.

IF YOU HAVE EMPLOYEES PROCEED WITH EMPLOYEE INFORMATION. IF YOU DO NOT HAVE EMPLOYEES PROCEED TO THE PROFIT/LOSS SECTION.

NUMBER OF EMPLOYEES AT RITA LOCATION: _____ MONTHLY GROSS PAYROLL AT RITA LOCATION: _____

WILL YOU BE WITHHOLDING RESIDENCE TAX ONLY? ☐ YES ☐ NO

SEND WITHHOLDING TAX FORMS TO

BUSINESS NAME: _____ PHONE: (_____) _____
CARE OF: _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

IF YOU ARE A NON-PROFIT ORGANIZATION STOP HERE AND SIGN AT BOTTOM

PROFIT/LOSS INFORMATION

ENDING DAY OF FISCAL YEAR IF OTHER THAN CALENDAR YEAR _____ / _____ / _____
MONTH DAY YEAR

SEND NET PROFIT TAX RETURN TO

BUSINESS NAME: _____ PHONE: (_____) _____
CARE OF: _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

THE INFORMATION HEREBY SUBMITTED IS TRUE AND CORRECT.

SIGNATURE: _____ DATE: _____

PRINT NAME: _____ TITLE: _____ PHONE: _____

MUNICIPALITY: _____
 ADDRESS OF CONSTRUCTION SITE: _____

BUILDING PERMIT #: _____
 TOTAL CONTRACT AMOUNT: \$ _____
 As the contractor, will your company be withholding local income tax from all employees on the job? ☐ YES ☐ NO

COMPANY/ADDRESS - CITY, STATE AND ZIP	OFFICER/OWNER NAME PHONE NUMBER	SOCIAL SECURITY OR FEDERAL I.D. NUMBER	ESTIMATED START DATE	NUMBER OF EMPLOYEES	ESTIMATED WAGES PER MONTH	TRADE
COZI-EACU-OR 612						
COZI-EACU-OR 62B						
COZI-EACU-OR 62B						
COZI-EACU-OR 62B						
COZI-EACU-OR 62B						
COZI-EACU-OR 62B						
COZI-EACU-OR 62B						

If necessary attach a separate sheet

The information requested on this form is essential to the establishment of your account and will be held in strict confidence. Please complete and sign this Registration Form and return within 15 days. Prompt completion of this form now can save you the expenditure of additional time and effort in the future. If you have any questions please contact the Business Registration Department at one of the numbers below. Thank you for your cooperation.

SEND RESPONSE TO:

REGIONAL INCOME TAX AGENCY
 ATTN: BUSINESS REGISTRATION
 P.O. BOX 477900
 BROADVIEW HEIGHTS, OH 44147-7900

CLEVELAND LOCAL: (440) 526-0900
 COLUMBUS TOLL FREE: (866) 721-RITA (7482)
 YOUNGSTOWN TOLL FREE: (866) 750-RITA (7482)

TOLL FREE: (800) 860-RITA (7482)
 TDD: (440) 526-5332
 FAX: (440) 526-3136